## Montana Medicaid - Fee Schedule School-Based Health Services October 1, 2015

## **Definitions:**

**Modifier** – When a modifier is present, this indicates system may have different reimbursement or code edits for that procedure code/modifier combination.

For example:

26 = professional component

TC = technical component

**Description** – Procedure code short description. You must refer to the appropriate official CPT-4, HCPCS or CDT-5 coding manual for complete definitions in order to assure correct coding.

Effective – This is the first date of service for which the listed fee is applicable.

**Method** – Source of fee determination

Fee Sched: Medicaid fee; not determined using RBRVS payment schedule

Medicare: Medicare-prevailing fee.

RBRVS: Based on Medicare Relative Value Units (RVU's) x Montana Medicaid Physician Services conversion factor x policy adjuster.

Conversion factor for Physician Services fiscal year 2016 is \$36.93

**Policy Adjuster - M = Maternity**, F= Family Planning

MSRP: Manufacturers Suggested Retail Price (MSRP): Equals a percentage of billed charges based on MSRP or the provider acquisition codst (when MSRP is available

**Fees** 

Effective October 01, 2015, this fee will be adjusted to reimburse the services at the federal matching assistance percentage (FMAP) rate of 65.24%

Please note the match rate is now activated by claim paid date, not date of service.

PA - Prior Authorization

Y: Prior authorization is required

Space - this indicator does not apply to this code

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					Office		Policy
Proc	Mod	Description	<b>Effective</b>	Method	Fees	PA	Adjust
H0036		COMM PSY FACE-FACE PER 15 MIN	07/01/2015	FEE SCHED	\$26.05		
H2027		PSYCHOED SVC, PER 15 MIN	07/01/2015	FEE SCHED	\$26.05		
T1000		PRIVATE DUTY/INDEPENDENT NSG	07/01/2015	FEE SCHED	\$7.28	Υ	
T1019		PERSONAL CARE SER PER 15 MIN	07/01/2015	FEE SCHED	\$5.24		
T2003		N-ET; ENCOUNTER/TRIP	07/01/2015	FEE SCHED	\$12.86		
V5266		BATTERY FOR HEARING DEVICE	10/01/2007	MSRP	\$0.00		
90832		PSYTX PT&/FAMILY 30 MINUTES	07/01/2015	RBRVS	\$44.90		
90853		GROUP PSYCHOTHERAPY	07/01/2015	RBRVS	\$18.07		
92507		SPEECH/HEARING THERAPY	07/01/2015	RBRVS	\$55.82		
92508		SPEECH/HEARING THERAPY	07/01/2015	RBRVS	\$16.50		
92521		EVALUATION OF SPEECH FLUENCY	07/01/2015	RBRVS	\$76.19		
92522		EVALUATE SPEECH PRODUCTION	07/01/2015	RBRVS	\$65.17		
92523		SPEECH SOUND LANG COMPREHEN	07/01/2015	RBRVS	\$132.98		
92524		BEHAVRAL QUALIT ANALYS VOICE	07/01/2015	RBRVS	\$63.95		
92557		COMPREHENSIVE HEARING TEST	07/01/2015	RBRVS	\$26.30		
92567		TYMPANOMETRY	07/01/2015	RBRVS	\$10.27		
92587		EVOKED AUDITORY TEST	07/01/2015	RBRVS	\$15.33		
92587	TC	EVOKED AUDITORY TEST	07/01/2015	RBRVS	\$2.29		
92587	26	EVOKED AUDITORY TEST	07/01/2015	RBRVS	\$13.01		
96101		PSYCHO TESTING BY PSYCH/PHYS	07/01/2015	RBRVS	\$56.19		
97001		PT EVALUATION	07/01/2015	RBRVS	\$52.83		
97002		PT RE-EVALUATION	07/01/2015	RBRVS	\$29.54		
97003		OT EVALUATION	07/01/2015	RBRVS	\$59.86		
97004		OT RE-EVALUATION	07/01/2015	RBRVS	\$37.02		
97150		GROUP THERAPEUTIC PROCEDURES	07/01/2015	RBRVS	\$12.27		
97530		THERAPEUTIC ACTIVITIES	07/01/2015	RBRVS	\$24.48		
97533		SENSORY INTEGRATION	07/01/2015	RBRVS	\$20.49		
97535		SELF CARE MNGMENT TRAINING	07/01/2015	RBRVS	\$24.48		